

705203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

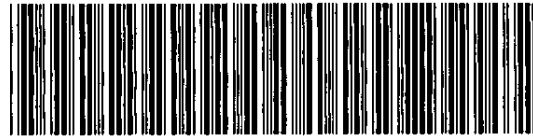
(Business Entity Name)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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09 JUL 22 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE
JUL 22 2009
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Prosecuting Attorneys Association

DOCUMENT NUMBER: 705203

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John N. Hogenmuller

(Name of Contact Person)

Florida Prosecuting Attorneys Association

(Firm/ Company)

107 West Gaines Street, Suite L-66

(Address)

Tallahassee, FI 32399-1050

(City/ State and Zip Code)

balston@myfpaa.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John N. Hogenmuller

(Name of Contact Person)

at (850) 488-3070

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Florida Prosecuting Attorney's Association, INC.

705 203

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Attach additional pages if necessary)
(continued)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Pres</u>	<u>William P. Cervone</u>	<u>120 W. University Ave</u> <u>Gainesville, FL 32601</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>William Eddins</u>	<u>P.O. Box 12726</u> <u>Pensacola, FL 32591</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec</u>	<u>Stephen B. Russell</u>	<u>P.O. Box 399</u> <u>Ft. Myers, FL 33902</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Officers Continued:

<u>Treasurer:</u>	<u>Glenn Hess</u>	<u>P.O. Box 1040</u> <u>Panama City, FL 32402</u>	<u>Add</u>
<u>President:</u>	<u>Mark Ober</u>	<u>419 North Pierce St.</u> <u>Tampa, FL 33602</u>	<u>Remove</u>
<u>Secretary:</u>	<u>Mark Kohl</u>	<u>530 Whitehead St.</u> <u>Key West, FL 33040</u>	<u>Remove</u>

The date of each amendment(s) adoption: July 1, 2009
(date of adoption is required)

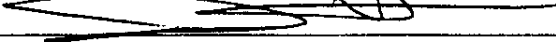
Effective date if applicable: July 1, 2009
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7/21/2009

Signature 
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

John N. Hogenmuller
(Typed or printed name of person signing)

Executive Director
(Title of person signing)